

Application Data Sheet

Application Information

Application number:: TBD
Filing Date:: December 15, 2003
Application Type:: Regular
Subject Matter:: Utility
Suggested Classification:: TBD
Suggested Group Art:: TBD
CD-ROM or CD-R?::
Number of CDs::
Number of Copies of CDs::
Sequence Submission?::
Computer Readable Form (CRF)?::
Number of Copies of CRF::
Title:: HSC70 Directed Diagnostics and Therapeutics for
Multidrug Resistant Neoplastic Disease
Attorney Docket Number:: 112418-149 (AUR-011US)
Request for Early Publication?:: No
Request for Non-Publication?:: No
Suggested Drawing Figure::
Total Drawing Sheets:: 30
Small Entity?:: Yes
Latin Name::
Variety Denomination Name::
Petition Included?:: No
Petition Type::
Licensed US Govt. Agency:: No
Secrecy Order in Parent Appl.?:: No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Canada
Status:: Full Capacity
Given Name:: Elias
Family Name:: Georges
City of Residence:: Laval
State or Province of Residence:: Quebec
Country of Residence:: Canada
Street of Mailing Address:: 2095 De Vouvray
City of Mailing Address:: Laval
State or Province of Mailing Address:: Quebec
Country of Mailing Address:: Canada
Postal or Zip Code of Mailing Address:: H7M 3J7

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Canada
Status:: Full Capacity
Given Name:: Lucille
Family Name:: Serfass
City of Residence:: Montreal
State or Province of Residence:: Quebec
Country of Residence:: Canada
Street of Mailing Address:: 5291 de l'Esplanade
City of Mailing Address:: Montreal
State or Province of Mailing Address:: Quebec
Country of Mailing Address:: Canada
Postal or Zip Code of Mailing Address:: H2T 2Z6

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Canada
Status:: Full Capacity
Given Name:: Anne-Marie
Family Name:: Bonneau
City of Residence:: Laval
State or Province of Residence:: Quebec
Country of Residence:: Canada
Street of Mailing Address:: 2095 De Vouvray
City of Mailing Address:: Laval
State or Province of Mailing Address:: Quebec
Country of Mailing Address:: Canada
Postal or Zip Code of Mailing Address:: H7M 3J7

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Canada
Status:: Full Capacity
Given Name:: Frédéric
Family Name:: Dallaire
City of Residence:: Montreal
State or Province of Residence:: Quebec
Country of Residence:: Canada
Street of Mailing Address:: 4683 Mentana
City of Mailing Address:: Montreal
State or Province of Mailing Address:: Quebec
Country of Mailing Address:: Canada
Postal or Zip Code of Mailing Address:: H2J 3B7

Correspondence Information

Correspondence Customer Number:: 23483
Phone Number:: 617-526-6000
Fax Number:: 617-526-5000
E-Mail address:: james.olesen@haledorr.com

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Dat ::
This application	An application claiming the benefit under 35 USC 119(e)	60/438,012	January 3, 2003

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::

Assignee Information

Assignee Name:: Aurelium BioPharma, Inc.